2009/2010 Boot Hockey Registration FormEntry Fee must accompany this form. You may register by mail, in person, or over the phone with a major credit card (651)558-2255. Only one (1) form of payment (cash, check or credit/debit card) will be accepted. Money Orders will not be accepted. Please make checks payable to: Municipal Athletics

1500 N. Rice St. St. Paul, MN 55117

(Office Use Only): Date Received	
Amount	
Check#	
Receipt #	
Staff Initials	

Team Name		
Managers Name		
Email Address (schedules will be emailed)		
Address		
CityZip	Day Phone	e()
Eve Phone ()	Cell Phon	e()
Games are played on Thursday nights @ Not	rth Dale Recreat	ion Center
Are you a returning team from last year?	Yes	No
I have read the enclosed conduct policiteam. I will be responsible for the con	-	=
Manager/Team Representativ	<u>e</u>	



